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CONFIRMATION NO. 2275

<b>SERIAL NUMBER</b> 10/769,823	<b>FILING OR 371(c) DATE</b> 02/02/2004 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3736	<b>ATTORNEY DOCKET NO.</b> CCF-5519NP2
<b>APPLICANTS</b> Shuvo Roy, Cleveland, OH; Aaron J. Fleischman, University Heights, OH; Edward C. Benzal, Gates Mills, OH; Lisa Ferrara, Cleveland Heights, OH;				
<b>** CONTINUING DATA *****</b> This application is a CON of 09/939,331 08/24/2001 PAT 6,706,005 which claims benefit of 60/228,166 08/25/2000 <i>BS</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>an BS</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 06/14/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>BS</i> Allowance <i>BS</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 15
<b>INDEPENDENT CLAIMS</b> 2				
<b>ADDRESS</b> 26294				
<b>TITLE</b> Apparatus and method for assessing loads on adjacent bones				
<b>FILING FEE RECEIVED</b> 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	